

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention

Albumin Fusion Proteins

As the below named inventor(s), I/we declare that:

This declaration is directed to:

☒

The attached application, or

☐

Application No. _____,

filed on _____,

☐

as amended on _____

(if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56.

All statements made herein of my/our own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

I/we hereby appoint the Practitioners at Customer Number 22195 as my/our attorney(s)/agent(s) to prosecute the application identified above, including any continuation or divisional applications, and to transact all business in the United States Patent and Trademark Office connected therewith.

FULL NAME OF INVENTOR(S)Inventor one: Craig A. Rosen

Signature: _____

Citizen of: _____

USInventor two: William A. Haseltine

Signature: _____

Citizen of: _____

US

Inventor three: _____

Signature: _____

Citizen of: _____

Inventor four: _____

Signature: _____

Citizen of: _____

☐

Additional inventors or a legal representative are being named on _____ additional form(s) attached hereto.